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ORIGINAL ARTICLES.

Psychic Healing.

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Read before the Topeka Academy of Medicine and Surgery,
October 11, 1897.

Psychic healing is the cure of disease by impression made upon the mind. It may properly be extended to include not only direct cure, but also the aid which psychic influence may render in bringing about comfort or recovery by allaying mental unrest and apprehension, and substituting mental quiet and hopefulness. It also embraces the removing by suggestion or command, imaginary diseases, so to speak, or hysterical disorder either with or without some morbid condition as a foundation.

Psychic healing has doubtless been known and practiced from the earliest times. The record of a psychic cure of nearly two thousand years ago is as follows: "And there was a man whose right hand was withered . . . He (the Great Physician) said to the man which had the withered hand, rise up, and stand forth in the midst . . . and he said unto the man, stretch forth thy hand, and he did so, and his hand was restored whole as the other." Without questioning the generally accepted opinion that this was an exhibition of miraculous power, the incident partook largely of the phenomena of psychic healing. There was mental power and command on one side, faith and obedience on the other. If the patient, in answer to the command, "Stretch forth thy hand," had said, "I cannot do it, I have been unable to use that hand from childhood," no

cure would have followed, but, in obedience to the divine behest, the effort was made, nervous power was regained, the circulation was re-established, and his hand was restored whole as the other.

Passing along the street in Topeka some time ago, I noticed a crowd around a barouche in which a vender of a nostrum was holding forth. Among the marvelous powers of his panacea, was its potency in curing deafness. Asking some one among the bystanders who was hard of hearing to come forward, he proceeded to demonstrate the virtues of his magical remedy. Holding a watch at varying distances, and asking the subject if he could hear it, he showed that the patient could hear the ticking of the watch no farther than about twelve inches from the ear. Applying his magic lotion, keeping up a verbose panegyric on its powers, its wonderful healing properties, and its surprising effects upon deafness, after a time he directly and forcefully told his patient that his hearing was vastly improved, and proceeded to demonstrate it. Holding his watch about a foot from the patient's ear, he says, "You can hear the watch tick plainly now." "Yes," was the answer. Removing the watch seven or eight feet away, "You can hear it now, can't you?" "Yes," replied the patient, and the trickster turned to the gaping crowd to say, "See how quickly I have cured this man of deafness," and to ask, "Who wants a bottle of this wonderful remedy? Your last chance, gentlemen, for a bottle of 'Humbugs Elixir of Vitality.' \$1.00 per bottle." And the suckers blew in their dollars.

A woman who had been unable to speak aloud for several years was carrying a pan of milk when she accidentally hit it against the door jam and spilled it. Surprised and disconcerted she voiced a sudden exclamation.

tion, and ever afterwards could speak readily enough. A patient got, or supposed she got, a pin in her throat. Physician after physician examined her throat, and assured her there was no pin there. But she continued to be annoyed by the presence of the pin, until a physician, a little more astute than his fellows, discovered the pin and triumphantly exhibited it after pretended removal. The patient had no more trouble. Sometimes such pretended cure fails of success, and only serves to intensify the patient's imaginary difficulties. A hypochondriac insisted he had in his stomach a live frog, and many physicians had failed to convince him of his error. A new doctor having been called he thought to relieve the patient's mind by pretending to relieve his bowels of the frog. He therefore gave his patient an active cathartic, and when it operated the doctor produced the frog, which had been surreptitiously introduced into the vessel. The patient looked for a moment at the frog, grasped his bowels with both hands, and exclaimed, "My God, I'm full of them!"

Crowds of invalids flock to the Schlatters and other well-advertised healers (which ought, by-the-way, to be spelled heelers), who perhaps bless handkerchiefs or display some of the bones of the saints, and straightway these invalids depart disclaiming any aches or pains, and throwing away canes and crutches. These famous cures, particularly in Roman Catholic countries, are often under the auspices of some cathedral, chapel or shrine. In the chapel of our Lady, church of St. Guadalupe, Mexico, I saw several score of crutches and canes for which cured cripples had no further use. So numerous had been the so-called miraculous cures at the shrine, and so valuable the free will offerings of the pilgrims, that the altar and choir had been surrounded with a heavy balustrade of silver.

Every now and again one hears of some mechanic or laborer who possesses wonderful healing power, which in some cases is claimed to come to the seventh son of the seventh son, in others it depends upon the conjunction of certain planets at the time of birth, or still in others depends upon animal

magnetism, while in some instances the source of such power is confessedly known.

An instance in which a man belonging to this latter class performed a genuine psychic cure, came under my observation many years ago.

A delicate strumous girl living in the suburbs of St. Louis, sprained her hip. She was obliged to remain in bed. The hip was swollen and painful, and after several months some of the best practitioners in St. Louis pronounced the condition one of incipient morbus coxarius. She had not walked a step for nearly a year, when a friend urged that a certain wheelwright, who had the reputation of possessing some occult powers and of performing some wonderful cures, be asked to treat the case. He consented, but while admitting that some wonderful cures had been wrought at his hands, disclaimed all knowledge of the nature of his healing power and would not promise recovery. He came a few times, made passes over the affected limb, and finally seating her in a chair, stepped to the other side of the room and commanded her to come to him. She walked across the room, full control of the limb was soon regained, and she has continued to walk as well as anyone for twenty-five years.

But such cures are not confined to the "lay" professors, they are sometimes wrought by the keen-witted doctor. At the last meeting of the State Medical Society Dr. Ochiltree read a paper giving a very interesting account of psychic healing by himself, of a useless ankle. The case, in short, was that of a woman who had been attacked by a sudden pain in the ankle and foot, and had been unable to walk for a year, except by aid of crutches. She consulted the doctor as to the best way of bandaging her limb, when, satisfying himself that there was no lesion to prevent her from using her leg, he told her she could be cured, that he could cure her then and there, and after making suitable mental impression, he commanded her to walk, and she did so. A paper by Dr. Punton, read at the same meeting, dwelt upon the benefits to be derived from normal suggestion, as he termed it, *i.e.*, the making

to patients suggestions intended to lead the mind away from morbid fancies.

One of my medical friends has related to me a good example of psychic healing in his own practice, which, by-the-way, runs counter to the saying that the prophet is not without honor save in his own country. Soon after his graduation, and beginning practice in his old home, a lady well known to him by reputation as one who had exhausted the resources of the neighboring practitioners, had one of her nervous sleepless attacks, and sent for him as the latest exponent of available medical progress. Appreciating, that to help his patient, to show his professional acumen, and to gain a client, he must make a strong impression upon this woman's mind, he examined the case with the appearance of great oracular wisdom, announced a profound diagnosis, and informed her that he had a new medicine just adapted to the disease, but which must be taken with a great deal of care and exactly at times specified. He then made up from his case some small powders of bicarbonate of soda, which he ordered to be given at intervals of exactly two hours. This prescription worked like a charm, quieted nervousness, and brought sound refreshing sleep. He won his spurs, and continued to be physician to this woman and her family as long as he practiced in the town. Sometimes a messenger would come to him at night saying that his patient could not sleep, and wanted some of those wonderful sleeping powders. If he did not happen to have soda in his pocket case he would get some from the kitchen pantry, with equally wonderful and satisfactory results.

Like an unknown comet which may suddenly make its appearance in the heavens, coming from regions unknown, dazzling by its hazy brilliancy, and suddenly disappearing into the boundless abyss of trackless space, a new healing luminary occasionally appears within our midst. It may be a "professor" who cures anything from headache to bellyache or corns by glasses; or it may be a dusky daughter of darkest Africa, who by laying on of hands, cures some men

and more women, of all sorts of ailments, even to the repairing of "digester tubes which have been ett off." "Aunt Lucinda," of Pleasant Valley, gets a good deal of gratuitous advertising. Her dooryard is thronged with votaries, not a few of whom recount their experience and cure in the daily papers—some of them feeling a distinct electric shock when she touches them. Some dilate upon her personal magnetism, some upon her electric touch, others upon her wonderful vitality. Of her votaries, some will doubtless remain cured of disorders more or less imaginary, but the larger number will relapse, only to take the next bait skilfully offered.

Time suffices only for this brief presentation of sense and nonsense, of fact and fancy, of truth and error, and I must hasten to the more important part of my paper.

Is there any such thing as psychic healing? If so, what are its adaptations, and what are its limitations? Can the general practitioner include it in his armamentarium and derive any benefit from it? Every physician appreciates the immense influence which the mind has over the body, without subscribing to the absurd vagaries of falsely so-called mental science or Christian science. Many years ago a fellow assistant physician and myself were taken sick on the same day. My fellow had at one time consulted a fortune teller, whose statement had for some reason made a profound impression upon him. Among other things, she told him he was to die at about 35. When he was attacked with this sickness, he was firmly of the opinion it was to be his last, and so it proved. Although at first I was supposed to be the sicker of the two, I had no predetermination to die about this time, but exactly the contrary. I do not know what the effect of hopefulness on the part of my friend might have been, but I am as sure as any one can be of such matters, that if in addition to my bodily sickness, which was very severe, I had been imbued with the idea that I was to die, it would have turned the scale against me.

Every physician appreciates more or less clearly the force of well-put suggestion. It is claimed that even inert substances can

be made to act as cathartics, emetics, hypnotics, etc., by impressing upon the mind that such action is to follow their exhibition. It is alleged that persons have died from mental impression caused by pretended opening of veins, trickling of water, and properly modulated conversation between the attending physicians.

A very simple experiment, especially with a young and susceptible person, is to tell them you have a preparation which has the peculiarity of at first tasting sweet, but that the sweet will soon be followed by bitter. After having thoroughly prepared the mind, give a little clear sugar. At first, descant upon its sweetness and then upon the oncoming bitterness, and the subject will soon assent to your suggestion that the bitter taste has come.

Now, in the instances of apparent miraculous cures, which might be extended indefinitely it is clear that the disorder was entirely imaginary, or a fixed idea of serious disease had followed some actual but not serious incident, or that the subject of some real malady had simply succumbed to the audacious suggestion of the operator, and imagined himself cured. In the cases of immobile members, certain it is, that under psychic stimulation the useless ankle again supported the body and the stiffened hip became supple. It is clear that there was no lesion of brain, nerve or muscle, in these cases, which was instantly cured. Take the case of supposed hip disease. There was, originally straining of the ligaments and muscles, pain on motion, effusion, inability to use and necessary rest. As time went on, inaction began to play an important part and the immobile condition became more and more confirmed, and the idea of inability to use became more and more firmly fixed. Although the age and general characteristics of the patient favored the idea of hip disease, there was a mistaken diagnosis. All that was needed to restore strength to the disused muscles and suppleness to the stiffened ligaments, was for some dominating, controlling mind to press the button of the will, surprise it into a lapse of its mistaken vigilance, induce it

to allow and to order the first movement, and nature did the rest. Incidentally, and showing how illogically the laity reason, especially if given to belief in the occultism of such exhibitions, the relatives of this girl, my warm personal friends, contended that the wheelright could in like manner cure any case of paralysis in the asylum of which I had charge.

We all know and admit the different characteristics of different persons. One throws a gloom over his associates, another scatters smiles and laughter wherever he goes. The one, in a sick room is long favored and depressing, the other is bouyant and inspiring. The one physician is not a success, he has a disheartening effect upon his patients; another whose facial expression of itself doeth good like a medicine, and whose cheery presence and conversation lifts his patient out of the slough of despond and pulls him up on the dry land of convalescence, is the successful, beloved physician.

Every physician uses psychic healing to a certain extent when he encourages his patient, and his patient's friends, when he imparts cheerfulness and hopefulness, when his presence in the sick room and in the home is a benison. Although this much will be admitted by every one, the question arises: Does the regular physician and his patients derive all the good they ought from psychic healing? No, they do not. But psychic healing is more intangible and evasive and less readily subjected to rules and demonstration than even the imponderable agents described in our treatises on *Materia Medica*.

As an atute physician expressed it, the public demand that their medicine be mixed with a certain amount of humbug, and the honest practitioner is, not unfrequently, at a disadvantage in competition with his less scrupulous competitor. A thoroughly competent and honest practitioner had been in attendance upon a case of some acute disease in the person of a young woman living with her parents. When convalescence became well established the doctor told the parents that the patient needed no more

medicine, but only to continue the system of diet, sun-baths and exercise which he had laid out and that she would soon be thoroughly well again, unless something unfavorable, but unexpected, should happen, in which case they could send for him. There was too much honesty and too little humbug in this advice to suit the parents, and they consulted another physician on the ground that the girl ought to be taking something. This physician inquired carefully as to the original sickness and what the other doctor had done and directed. He said the advice which had been given was good so far as it went, but that the girl really needed something to take. He then directed the father to go to the village blacksmith, fill a quart bottle one-quarter full with charcoal taken directly from the forge, fill up with rain-water, and shake thoroughly. After it had settled they should give the girl one tablespoonful of the clear liquid thrice daily, and keep on with the digestible food, the sun baths and the exercise which had already been prescribed. This satisfied them, and the uninterrupted recovery of the girl was due, in their opinion, to the astuteness of the second physician and tri-daily doses of aqua pura! which he had prescribed.

The sentiment which leads many people who are able to pay for medical service, to doctor themselves with patent medicines is analogous. If they go to the physician it is the doctor who is doing the work and getting the credit; if they buy patent medicines they flatter themselves they are diagnosticians and therapists.

There is an inherent weakness in human nature, or at least in the nature of a great many humans, which leads to confidence in the curative effect of occult, mysterious agencies and powers, especially at the hands of ignorance or brazen effrontery. This weakness cannot be successfully combatted by logical argument or scientific demonstration. It must be fed on hocus-focus, confidence, faith, normal suggestion, pretense, placebos and such similar food as it can assimilate. It would have been useless to argue with the girl who had

a stiffened hip that there was nothing really the matter. If it was necessary that her mind be impressed with the idea that something unusual, abstruse, super-human was to be done, that her attendant possessed supernatural powers, and when such impression was produced and the command given to arise and walk, it was as though the volition of the operator had taken possession and control of the subject and directly stimulated the unused muscles to action. This vicarious stimulation may be likened to the well known fact in physics, that a wire already conveying one current of electricity can be made to carry another current of differing intensity or character.

A fellow-craftsman was visited by an agent of the Hazard Manufacturing Company, who urged the use by my friend, in the institution of which he was superintendent, of the medicinal preparations manufactured by the firm he represented. My friend declined to give an order and, in partial explanation said: "I do not use much medicine; I depend largely upon *Vis medicatrix naturæ*." "Ah, indeed," replied the drummer, that must be a new remedy; I never heard of it before; is that one of Wyeth's preparations?"

In common with the drummer, a great many of the laity have never heard of *Vis medicatrix naturæ*, the self-recuperative power of the bodily system independent of the use of medicine. They have no conception of the part taken in the cure of disease by natural inherent reparative power, but have the idea that it is always and simply the drugs which effect the cure. We know that, however important drugs may be—and their importance cannot easily be overestimated in many cases—that it is only in conjunction with the natural recuperative powers that they can be of any service. The physician who advised trusting his convalescing patient to these natural powers was discredited, the one who supplemented such advice with aqua pura filled a long felt want and gained both credit and ducats.

The conclusions to which consideration of this subject lead are as follows:

1. One mind can and often does exert a subtle, inexplicable influence over another normal mind.

2. The physician, by an encouraging, hopeful, buoyant attitude toward his patient, may furnish such a mental stimulus as will turn the tidal forces of life toward physical restoration.

3. It is the bounden duty of the physician to make all possible use of such mental stimulation.

4. Charlatans of various grades of social and intellectual standing do actually perform psychic cures, many of which are permanent.

5. There is a field for the exercise of psychic healing by the regular practitioner which he should sedulously cultivate. The cases to which psychic healing are applicable may be classified under four divisions.

a, Classes in which there is real bodily disease with well balanced mentality.

b, Cases in which there is real disease with exaggerated ideas of its importance.

c, Cases in which the disease is practically wholly imaginary or hysterical.

d, Cases in which the mental attitude of the patient or his friends necessitate the doing something simply for psychic effect.

In the first division, where there is real bodily disease with well balanced mentality, psychic influence will needs be limited to a cheery, hopeful, encouraging attitude on the part of the physician and the inspiring in the patient a quiescent, confident, hopeful mental state which may not only render illness less tedious, but may count much toward recovery.

In the second division, real disease with exaggerated ideas of its importance, the same hopeful, encouraging attitude is indicated, and the exaggerated ideas may oftentimes be successfully combatted by procedure akin to those to be considered under the next division.

It goes without saying, that the real domain of psychic healing is our third division where disease is, so to speak imaginary. When the physician has clearly made out the case to be dependent upon the imagination, it is a question of tact, mental power

and control on the one hand, and of faith, subordination and assent on the other. If the physician can gain the mastery of his patient's mind, he may issue his commands and exorcise the evil spirit.

The fourth division call for such action as will minister to the prejudices of the patient or his friends.

An old lady about to take a trip by boat was being importuned by agents of rival lines to take passage in their respective boats. She expressed fear of being blown up by explosion of the boilers. One agent told her that the boilers in his boat had just been inspected and were perfectly safe, the other gravely assured her that on account of the danger of explosion the boilers had just been taken out of his boat. He secured a passenger, who made her trip serenely secure in the delusion that she was on a steamboat without boilers.

Repugnant though it may be to our sense of probity, there are cases and occasions which justify judicious deceit, to the end that a serene, helpful frame of mind may be induced in the patient and his friends.

6. Although the regular practitioner may successfully make use of psychic healing in all classes of cases, the charlatan will always distance him in the frequency and marvelousness of his cures.

The reasons are obvious. The physician's real knowledge of anatomy, physiology and pathology, will handicap him in this free-for-all race. The charlatan, unincumbered by any knowledge of, or reverence for nature or science, educated only in arrogant effrontery and ignorant braggadocia, exemplifies the old adage, that "fools rush in where angels fear to tread." Fearing nothing of failure, because he knows nothing of natural limitations, he hesitates not to use his panacea and to promise recovery in every case. That he counts so many cures and pseudo cures, is because his votaries are already in a condition of something like self-induced hypnotism.

In our next issue will be found an interesting article on "Mercury."

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Topeka, Kansas, Saturday, Oct. 16, 1897.

NEWSPAPER reporters in medical society meetings seem to be rather a popular fad, but the fad sometimes brings a little unpleasantness. The last meeting of the Topeka Academy was an interesting one from the fact that the subjects of hynotism and the psychic treatment of disease were discussed. Many various opinions were expressed, but the newspaper with big headlines announces the fact that the most prominent physicians in Topeka endorse Christian science. It is not usually newspaper policy to present but one side of a subject, and that is usually the side which will appear most sensational. Such reports certainly do not reach the end desired by the profession, and do not educate the people out of their follies and superstitions. Popularity derived from such reports is not often of great benefit to the practitioner, and in the majority of instances brings discredit

upon his own faith in the tenets of the profession. If the proceedings of our medical societies are to be published in the daily press, the report should be prepared by someone competent to do it fairly and honestly. Medical topics have become quite popular with the papers, and most any subject in that line serves for a sensational article.

A RECENT suit brought by Paul Pâquin against John T. Milliken has brought out some sensational disclosures in the preparation of the so-called anti-tubercle serum. According to Milliken there was misrepresentation as to the method of manufacture and the virtues of the article. Theoretically there was probably much reason to believe that a great thing had been accomplished, but practical experience demonstrated to not a few that there was not only no virtue in the serum, but in many instances serious harm might result. We hope the present suit will bring out all the facts in the manufacture of this serum, and if there has been an intentional fraud perpetrated, the profession and the public may be informed of it and be prepared to protect themselves.

THE proceedings of the State society will soon be published in book form, and distributed to members in good standing. The papers and discussions will necessarily be omitted on account of lack of funds, but as the papers have nearly all been published in medical journals it is probably no great difference. Papers are seldom read in the proceedings, and when once published the author derives all the benefit he would likely receive from their compilation in book form.

THE meeting of the Association of Santa Fe Surgeons was held this week in Las Vegas. A number of Kansas men are in attendance, and the meeting promises to be an exceptionally good one.

The Topeka Academy.

The Topeka Academy of Medicine and Surgery met in A. O. U. W. hall Monday evening, Oct. 11, 1897. Dr. Ida C. Barnes president.

The following members were present: Drs. Minney, Lindsay McVey, Alkire, Powell, Eastman, Adams, Magee, Barnes, Longshore, Stewart, J. C. McClintock, L. H. Munn and C. S. McClintock. Visitors, Drs. Niles and Johnson, and medical students.

Dr. Herman S. Judd, Rush Medical College, 1895, was elected a member.

"Psychic Healing" (Dr. B. D. Eastman). See page 575.

Discussion.

Dr. Lindsay: The paper is *quite interesting* to me, as it doubtless is to you, and I presume we could all give instances of cases on this line. As physicians and scientists we can recognize this fact from our own experiences. The thing for us to ask is how it is this comes about. *We can't comprehend a disorder that does not effect a material part.* There must be some very fine departures in the structure of the brain that makes these things possible. It seems to me in all of these cases there must be something in that brain to make it possible for it to be touched in that way. In order to get relief there must be a very *great concentration of the mind of the physician.* I think it is possible for people to be hypnotised by inanimate objects. The explanation of this is, so far as I know, not plausible, *but we have some conjectures.* Dr. Ochiltree, who read a paper at the State Medical Society, took the position that there was no such thing as hypnotism. *Chickens and animals have been hypnotised.* So I think we must admit the condition of hypnotism, and there may be a hypnotic state which does not go so far as the condition of sleep. I think this is illustrated in every day life.

Dr. Stewart: This is an *interesting subject*, and has occupied my mind to some extent every since I entered the practice of medicine. There is a difference between treatment by hypnotism and the plans of

treatment instituted by physicians for the purpose of inspiring hope in a depressed patient. Hypnotism inhibits. The inspiration of hope stimulates every function, and thus increases the nutrition.

Dr. Alkire: This is a condition that is *very interesting* to all practitioners of medicine. I think it is our duty to give a patient anything that will help him. Mind does have a marked influence over matter, and that the brain is the most highly organized portion of the body. When a person comes to our office we know they have come because they have some disease of the body. *Give suggestions along with medicine.* When in doubt always *give water.* I had a patient, an old lady, who was complaining very much, and I could not discover what ailed her, so I took a *half pint of water* and colored it with a little coloring matter, and gave her explicit directions for taking it, *assuring her she would get well*, and she took it faithfully, and did improve very much. In another case I know a man who came all the way from Pennsylvania to be treated by this old negro quack doctor here. I saw the doctor treat him. *About how this takes place, none of us know.* The action of the nervous system might well be compared to the electric battery, and the fibres to the wires.

Dr. R. E. McVey: I think suggestive treatment depends on the intelligence of the patient. If the patient thoroughly understands his case anything in the line of suggestive treatment will do no good.

Dr. Magee: In the majority of cases you tell a patient what symptoms you will have from a certain medicine, *and you will get them.* I have seen patients relieved of intense pain by a hypodermic injection of *water.* There is certainly some phenomena which is exerted upon the body through the mind.

Dr. Minney: *Every physician should use suggestive treatment.* I was under the impression that suggestive treatment is simply a form of hypnotism. When I give medicine I expect results. Get the confidence of the patient and you have half the battle.

Dr. Powell: I think this paper is one that deserves a great deal of praise. I under-

stood that the subject was "Psychic Healing," not hypnotism nor suggestive treatment. If we knew the minute pathology in these cases we might be able to get better results. I think we should *use suggestive treatment in some cases*. If a patient has a malignant disease I believe it might be wise *to conceal the truth from him* and relieve him by any means of his pain. I believe in *absolute candor to patients*, and think that that is the way we get the best results. I think *young practitioners* are prone to diagnose cases they do not fully understand as mental disorders, when a careful examination would show to be a disease of some organ. I know of a case that had been termed hysteria which was in reality a case of mitral regurgitation.

Dr. McClintock: I am glad to see this paper discussed. *I believe you flounder hopelessly on a subject which you will not investigate. You are prejudiced. You don't believe in faith healing.* You admit the same thing you did fifty years ago, and no more. *People who practice this do get good results. These things will be investigated by some scientific body, but not by you.* You are handicapped by your knowledge.

Dr. Stewart: I just want to say a little more. *Suggestions are not lies. If we understood our cases we would not resort to lies.* Subterfuge is unworthy of a self-respecting physician. *You may suppress facts.* It is not always expedient to explain everything to the patient, but it is not necessary to prevaricate. It is not humiliating to say we do not understand all about hypnotism, *for we do not fully understand anything.* True it is that there are "More things in heaven and earth than we have dreamed, Horatio," but there are great gains in our knowledge of these subjects being made every day.

Dr. Eastman: I am greatly pleased with the way the subject has been handled. I did not pretend to explain and I don't explain. There is certainly some condition which we call hypnotic. If you do get a microscope which magnifies three trillion times you will not see the vital point in a cell and you never will.

HARRIET E. ADAMS, M.D.,
Secretary.

Typhoid Fever Without Intestinal Involvement.

The Philadelphia Polyclinic.

The progress of bacteriologic science has done much to clarify our notions concerning disease processes in general and to enlarge our special pathological conceptions. We have learned, among other things, that infectious disorders, are, as a rule, local processes primarily, although they may become generalized as a consequence of dissemination of the causative micro-organism through the blood stream. Such phenomena of constitutional disturbance as may be present are readily explicable by the secondary intoxication that takes place as a result of bacterial activity.

While pathogenic bacteria occasion, as a rule, specific infections, it is recognized that these may assume various forms, in accordance with the seat of localization and other influences of less obvious nature. Thus, the pneumococcus may give rise not only to pneumonia, but to meningitis as well; the tubercle bacillus may find lodgment and unfold its activities not only in the lungs but also in the glands, bone, serous and synovial membranes, etc.; the streptococcus pyogenes may cause not only erysipelas, but it may give rise to suppuration as well. By analogy we are thus able to comprehend how, for instance, typhoid infection may take place without involvement of the bowel. Cases have been reported in which although there was swelling of Peyer's patches, there was no ulceration; but recently a case has been reported in which Peyer's patches appeared not to be involved at all.

The case last referred to occurred in the service of Dr. Cheadle, in a boy three years old, of whom a brother and sister had been for some time already under treatment for typhoid fever. The child came under observation on about the tenth day after the symptoms with a history of diarrhoea, vomiting and debility. His appearance was heavy and apathetic, the lips being dry, cracked and bleeding. On the abdomen were

three rose-colored papules, which faded on pressure, and on the back there were four or five more. The abdomen was swollen and tympanitic and the liver was enlarged, but the spleen did not appear to be increased in size. The heart showed signs of slight enfeeblement. The pulmonary percussion-resonance was preserved, although air entered the lungs but poorly, and a few moist rales and musical rhonchi were heard posteriorly. The urine presented no abnormality. Diarrhoea was not marked, the stools being yellowish-brown in color and soapy in consistence.

On the third day subsultus tendinum and marked carphology were observed. Two days later the catarrhal sounds heard over the chest were slightly louder. Profuse diarrhoea now set in. On the eleventh day epistaxis and vomiting occurred. The abdomen became less distended and moved freely with respiration. On the sixteenth day the breath sounds heard over the chest were obscured by the sibilant rhonchi and mucous rales. In the left axilla the breathing was bronchial in character. The area of deep cardiac percussion-dulness was a little increased to the left and the first sound at the apex was weakened. On the seventeenth day the patient passed into a comatose state and there was slight dyspnea. Curds were present in the stools and vomiting took place. On the twenty-third day the first sound of the heart at the apex was duplicated and the second sound was accentuated, with a resulting, cantering rhythm. On the twenty-third day the patient was nauseated after taking food. The pulse became feeble and irregular and death ensued. On the twelfth day the serum test yielded a positive reaction, loss of motility of most of the bacilli, and marked clump formation taking place on the addition of blood to a diluted culture. On the seventeenth day the typhoid bacillus was separated from the urine. A positive reaction to the serum-test was yielded a second time on the twenty-third day.

Upon the post mortem examination no ulceration of the intestine was visible, and Peyer's patches appeared to be normal.

There was a slight indentation of the mucous membrane close to the ileocecal valve, but this was probably accidental, as microscopic examination showed nothing abnormal. The colon also was normal. The spleen was normal in size and appearance. It was opened aseptically and cultivations on agar, gelatin and potato were made. The culture-tubes after inoculation showed typical colonies of the typhoid bacillus. Many sections of the spleen were examined, but no typhoid bacilli could be found. The mesenteric glands and the liver were enlarged. Before the heart was opened blood was collected from the right auricle in Pasteur pipets and the serum test was made with a culture of bacilli which had been separated from the patient's urine. Loss of motility in most of the bacilli and clump formation were observed. The left ventricle of the heart was slightly dilated. The bronchi contained mucus and there was some lobular collapse of the lung tissue.

The case thus briefly related sustains the position of those who maintain that typhoid fever is not a disease of the intestine *per se*, although the infection may generally be viewed as primarily a local one, and although the intestine is most commonly the original and most conspicuous seat of the disease-process.

Toxin and Antitoxin of Tetanus of the New York City Health Department Laboratory.

From the Journal of the American Medical Association.

Dr. Alexander Lambert a bacteriologist having a special detail in the direction of the immunization against tetanus, has written for the *New York Medical Journal* the fullest American account of this procedure that we have yet seen. His article closes with a bibliography that includes no less than 81 titles, a large proportion of which is in the German and French tongues. Dr. Lambert has collected 114 cases whose mortality under antitoxin has been 40.3 per cent. The tetanus antitoxin is prepared in the same manner as the diphtheria antitoxin.

by inoculating the tetanus toxin in increasing doses to horses. The toxin is grown in bouillon under hydrogen, and after ten or fifteen days filtered through porcelain, and the germ free filtrate is used for the inoculations. The horses receive half a cubic centimeter as the initial dose of toxin, and this dose is increased as rapidly as the horses can stand it, until they support seven to eight hundred cubic centimeters or more at a single dose. After some months of this treatment the blood of the horse contains the antitoxin in sufficient amount for therapeutic use. When the animals' temperatures are normal and they have recovered from the dose last given, they are bled into sterile flasks and the serum collected. The serum contains the antitoxin and is tested on white mice or guinea pigs.

The New York health department has at present two horses well immunized against tetanus, and furnishes serum of the strength of one to four hundred million, that is, one cubic centimeter will protect four hundred million grams of white mice against a three-to-four-day fatal dose of tetanus toxin. Reckoning in antitoxic units, twenty cubic centimeters of serum will contain eight thousand antitoxic units, an antitoxin unit in tetanus being the amount of serum necessary to protect one million grams of test animal. The serum is supplied in 20 cubic centimeter bottles, and should be injected in 10 to 20 cubic centimeter doses. In severe cases the patient should receive 50 cubic centimeters in the first twenty-four or thirty-six hours, and these 10 to 20 cubic centimeter doses repeated once or twice each day during the following four or five days longer, according to the course of the disease. The circular accompanying the bottles explains more fully the proper method of procedure.

As has been shown by Roux and Calmette the antitoxic serum has no direct destructive action on the toxin itself, but through some unknown action on the body cells the serum prevents the toxin from exerting its destructive action between the antitoxin and toxin or some neutralizing effect, such as occurs between an acid and an alkali, has been

shown to be incorrect. As Buchner also shows there is no destructive action of the antitoxic serum on the toxin, either outside or within the body, the action seeming to be one which, by producing certain changes within the cells, renders the action of the toxin inert. Tizzoni concludes that the blood serum of inoculated animals does not act as a remedy, which neutralizes in the organism a certain active principle of disease and directly counteracts certain functional changes, but it acts in all probability in curing tetanus by immunizing the parts of the body not already tetanized and so limits the tetanus to local form. The New York board of health supplies its antitoxin to charitable institutions free of charge but to others the cost is \$3 per vial, containing 20 cubic centimeters. The serum should be injected as early as possible, as the dose required to neutralize tetanus toxin absorbed increases with great rapidity with each hour's delay.

The initial dose in each case in an adult should be at least one vial, or 20 c.c. When the treatment is begun at the first appearance of tetanic symptoms, and these do not point to a very severe infection, and especially when the incubation period has been long, say two weeks, the same quantity or one-half the quantity, according to results, should be repeated at intervals of from six to twelve hours, during the four following days.

Lord Lister on Vivisection.

From the Cleveland Journal of Medicine.

At this time when so many old ladies of both sexes are piping their protests against vivisection, it may be of interest to note the utterance of Lord Lister on this subject, as extracted from his valuable address on "Modern Pathological Research," at the late opening of the Belfast Physiological and Pathological Laboratories:

"There are people who entertain exaggerated views regarding the work that is accomplished at these laboratories. There are people who do not object to eating a mutton

chop, people who do not even object to shooting a pheasant, with the considerable chance that it may be only wounded and may have to die after lingering in pain, unable to maintain its proper nutriment, and yet who consider it something monstrous to introduce under the skin of a guinea pig a little inoculation of some microbe to ascertain its action. Those seem to me to be most inconsistent views. With regard to all matters in which we are concerned in this world, everything depends on the motive. A murderer may cut a man's throat to kill him; any one of you medical students may have to cut a man's throat to save his life. The father who chastises his son for the sake of the good of his morals is a most humane man; a father who should beat his son for the mere sake of inflicting pain upon him would be an inhuman monster. And so it is with the necessary experiments upon lower animals. If they were made, as some people seem to assume, for the mere sport of the thing, they would be indeed to be deprecated and decried; but if they are made with the wholly noble object of not only increasing human knowledge, but also diminishing human suffering, then I hold such investigations are deserving of all praise. Those little know, who lightly speak on these matters how much self denial is required in the prosecution of such researches when they are conducted, as indeed they always are, so far as I am aware, with the object of establishing new truth. The exercise of a little charity might lead those who speak of us as inhuman to reflect that possibly we are as human as themselves.

The profession to which I have the great honor to belong is, I firmly believe, on the average, the most humane of all professions. The medical student may be sometimes a rough diamond, but when he comes to have personal charge of patients, and to have the life and health of fellow creatures depending on his individual care, he becomes a changed man and from that day forth his life becomes a constant exercise of of beneficence. With that beneficence there is associated benevolence, and in that practical way our profession becomes the most

benevolent of all. If our detractors knew this common sense would enable them to see that our profession would not be unanimously in favor of these researches if they were the iniquitous things which they are sometimes represented to be."

Malarial Hematuria.

The Medical Summary.

In a late number of the *N. O. Medical Journal* there appeared an article from the pen of Dr. J. W. Meek, upon the subject of malarial hematuria, which concludes as follows:

1. Give hyposulphite of sodium in one-drachm doses every two hours until the patient is thoroughly purged. Then continue in smaller doses, until the system is saturated with it.
2. Give morphine and atropine, hypodermically, sufficient to quiet stomach; also blister epigastrium if necessary.
3. Give an abundance of water to wash the coagula that must necessarily accumulate in the urinary tubules after a hemorrhage. Hot water or hot lemonade is frequently better borne by the stomach than cold. Cupping over the loins is also to be recommended.
4. The diet should be mild. Fresh buttermilk is usually well borne by the stomach, and is also a mild diuretic, and I have come to rely on it as an article of diet in this as in many other cases.
5. Keep the patient in a strictly recumbent posture.

I give hyposulphite of sodium in this affection for the following reasons: *a.*—It is a stimulant to the hepatic secretion, causing in large doses abundant biliary secretion, and is also a valuable intestinal antiseptic. *b.* I believe free sulphurous acid is disengaged in the blood, and that this agent is an antizymotic to such an extent that it destroys the micro-organism which is the real cause of the disease, and thus arrests the process of corpuscular disintegration.

DR. SCOTT of Stafford, Kas., has been appointed by the board of charities to the position of assistant superintendent, to succeed Dr. Willard. The appointment takes effect in December.

The Japan Red Cross Society is about to build two hospital ships of 2,600 tons each, at a cost 1,000,000 yen, to be used for patients in time of war.

Aseptolin.

To the Medical Profession:

It has recently been brought to my attention that several manufacturers have placed on the market certain preparations as substitutes for "Aseptolin," which have manifestly not been made strictly in accordance with my formula, as analysis fully proves. These defective solutions have not only failed in accomplishing the cure of the patient, but in many instances have caused abscesses and other harmful results. I must not be held accountable for these evils which directly result from the defective compounding of the preparation. The only preparation compounded strictly in accordance with my formula is "Aseptolin-Edson," prepared by the Asepta Chemical Co., of New York, under my personal supervision.

(Signed) CYRUS EDSON.

Taka-Diastase.

WE take the following from literature on Taka-Diastase lately issued by Messrs. Parke, Davis & Company:

"When Taka-Diastase was first produced we did not consider it probable that it could be held in solution in such a way as to make a permanent and palatable preparation without destroying the amylolytic converting power of the diastase to a certain extent. We have been experimenting in this direction, however, for upwards of a year, and early last summer found that we could make

a perfectly reliable and palatable liquid Taka-Diastase. The question of its permanency could only be determined by time and exposing the experimental batches to varying degrees of heat.

"We have succeeded in producing just what we desired, and trust that our efforts to produce a liquid preparation of Taka-Diastase, which will be found particularly acceptable to children, will meet with your approval.

"We originally instituted these experiments at the request of practitioners who had obtained satisfactory results with Taka-Diastase, whose practice being largely among women and children, often had patients complain of having to take it in powders, and asked for a liquid. Each fluidrachm contains two grains of Taka-Diastase, and, as you are aware, one grain Taka-Diastase will convert 100 grains of starch in ten minutes under proper conditions.

"Careful experiments have appeared to indicate that the proper dose for adults of the Liquid Taka-Diastase is one teaspoonful during or immediately after meals."

A Reliable Food.

MESSRS. JOHN CARLE & SONS, NEW YORK CITY — *Gentlemen:* I have received the "Nursing World Clinical Records" and samples of your Imperial Granum, although it was unnecessary to send the latter to acquaint me with its value, as we have a *living example in our only son* of the worth of Imperial Granum, and I have *prescribed it constantly for eleven years*, and always with the very best results.

Yours very truly,
—M.D.

Sept. 2, 1897.

Clinical Records and samples of this celebrated food free, charges prepaid, on application to JOHN CARLE & SONS, 153 Water St., New York City.

FOR medical books call on or write to G. D. REED, Kansas Medical College, Topeka, Kansas.

The World's Congress of Medico-Climatology.

OFFICE OF JOHN A. ROBINSON, M.D., PRES., }
103 STATE ST., }
CHICAGO, ILL., December 30, 1893. }

The Walker-Green Pharm. Co.: I believe I cannot close the record of the dying year in any more fitting a manner than by writing my opinion of your quartet of Six Elixirs. They are certainly palatable, safe and efficient. As a large number of my patients are consumptives, who in addition to the use of the physiological remedies, rest, diet, exercise, air and bathing, need a good general reconstructive agent. I have been induced to use your Elixir Six Hypophosphites, in lieu of the various syrups and emulsions of hypophosphites that are in the market, because your elixir agrees better with the digestive organs and seems to increase the general nutrition more rapidly. I have made it a rule of principle not to give testimonials except I have proven the preparation to be of undoubted value.

Yours truly,

JOHN A. ROBINSON, M.D.,
Professor General Medicine, Post-Graduate Medical School.

Ferratin in Anemic Dyspepsias.

Dr. Elbridge G. Cutler, of Boston, in an excellent paper, entitled "General Remarks on Gastric Dyspepsia," read before the Massachusetts Medical Society, June 8, 1897, and published in the *Boston Medical and Surgical Journal*, Sept. 9, 1897, advises the use of Ferratin to increase the hemoglobin. In examining the patient, "the relation or dependence of dyspeptic conditions on other local diseases or general disturbances" should be found. The lungs and the urine should be examined; the hemoglobin should be examined weekly, and the patient weighed; and if diet, control of daily life, etc., do not increase the hemoglobin, then Ferratin should be used to aid the other measures.

DOCTOR:—Your library is not complete without the *Hypnotic Magazine*. Cost of this handsome monthly, including premium book on "Suggestive Therapeutics" is only one dollar (\$1.00) a year. THE PSYCHIC PUBLISHING CO., 56 Fifth Avenue, Chicago.

News Clippings.

Dr. C. M. Blackford, Jr., has been chosen to fill the new chair of pathology in the medical department of the University of Georgia.

The State Medical Board of Ohio declares that osteopaths must pass the medical examination and register whether they give medicine or not.

The *British Medical Journal* thinks that Dr. Sanarelli will probably receive the prize of \$110,000, which a bill passed by the Legislature of Brazil offers for the discovery of the microbe of yellow fever. The same bill provides another \$110,000 for the discovery of a curative serum for the same disease.

There has been some excitement lately in Illinois over a report that Dr. John B. Hamilton was about to put the pauper patients of the Elgin Asylum in uniforms. The doctor says by purchasing goods for clothing that all can be examined at once and certified to, he only seeks to save the State from being robbed. The system, he says, is not new, but has been in vogue for some time.

The Belgium Consul at Louisville, Ky., censures some medical men of Dayton, O., because of their loose methods in sending in birth-certificates to the Board of Health. The Belgium Department of State in seeking to establish the birth, and legitimacy of one Bertha Delfosse, find themselves thwarted because the doctor never registered the birth of the child. A large fortune is at stake, which it may lose.

The City Hospital of Cincinnati, O., according to the *Times-Star*, has lately put in force a law which permits it to refuse admission to all patients not residents of the city unless "humanity cases." The directory is their guide in determining whether or not the patient is a resident. A number of worthy cases have been refused admission in spite of their claims that they were citizens of Cincinnati.